

CLAIMS ONLY						Application Number 9/350043		Filing Date		
						Applicant(s)				
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1			1				51			
2				1			52			1
3				1			53			1
4				1			54			
5				1			55			1
6				1			56			1
7				1			57			1
8				1			58			1
9				1			59			1
10				1			60			1
11				1			61			1
12			1				62			1
13				1			63			1
14				1			64			1
15				1			65			1
16			<del>1</del>	<del>1</del>			66			1
17			<del>1</del>	<del>1</del>			67			1
18			<del>1</del>	<del>1</del>			68			1
19			<del>1</del>	<del>1</del>			69			1
20			<del>1</del>	<del>1</del>			70			1
21				1			71			1
22				1			72			1
23				1			73			
24				1			74			1
25				1			75			1
26				1			76			1
27				1			77			1
28				1			78			1
29			<del>1</del>	<del>1</del>			79			1
30			<del>1</del>	<del>1</del>			80			1
31				1			81			1
32				1			82			1
33				1			83			1
34				1			84			1
35				1			85			1
36				1			86			1
37				1			87			1
38				1			88			1
39				1			89			1
40				1			90			1
41				1			91			1
42			<del>1</del>	<del>1</del>			92			1
43			<del>1</del>	<del>1</del>			93			1
44			<del>1</del>	<del>1</del>			94			1
45			<del>1</del>	<del>1</del>			95			1
46			<del>1</del>	<del>1</del>			96			1
47			<del>1</del>	<del>1</del>			97			1
48			<del>1</del>	<del>1</del>			98			1
49			<del>1</del>	<del>1</del>			99			1
50				1			100			1
Total Indep			4				Total Indep		0	
Total Depend			34				Total Depend		50	
Total Claims			38				Total Claims		50	

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CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
10 1							51					
10 2							52					
10 3							53					
10 4							54					
10 5							55					
10 6							56					
10 7							57					
10 8							58					
10 9							59					
10 10							60					
11							61					
12							62					
13							63					
14							64					
15							65					
16							66					
17							67					
18							68					
19							69					
20							70					
21							71					
22							72					
23							73					
24							74					
25							75					
26							76					
27							77					
28							78					
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep			0				Total Indep					
Total Depend			2				Total Depend					
Total Claims			2				Total Claims					

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